

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/428,808	10/28/99	370	2744	NORT-0014-US

APPLICANT

WILLIAM S. LEE, PLANO, TX.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/22/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 6	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 8
Verified and Acknowledged Examiner's Initials _____ Initials _____					

ADDRESS

DAN C HU  
TROP PRUNER HU & MILES PC  
8554 KATY FREEWAY  
SUITE 100  
HOUSTON TX 77024

TITLE

PARSING MESSAGES COMMUNICATED OVER A DATA NETWORK

FILING FEE RECEIVED	FEEs: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
\$1,204		

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
<div style="display: flex; justify-content: space-between;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">APPLICANT</div> <div style="text-align: center;"> <p>PACE SYSTEM - BATCH HEADER</p> <p>NEW APPLICATIONS</p> <p>ENTRY OPERATOR: BRITTON, PAULA</p> <p>BATCH NUMBER: 200</p> <p>* * * * * APPLICATION NUMBERS CONTAINED IN THIS BATCH * * * * *</p> <p>09/428808</p> </div> </div>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged <u>Examiner's Initials</u> <u>Initials</u>					
ADDRESS					
TITLE					
FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____		